2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004032

Entity Name: MISION HISPANA ADONAI, INC.

FILED Jan 16, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6590 GOLDEN GATE PARKWAY NAPLES, FL 34105

Current Mailing Address: New Mailing Address:

6590 GOLDEN GATE PARKWAY NAPLES, FL 34105

FEI Number: 04-3668606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GULARTE, FREDY M
4515 28TH PL SW
NAPLES, FL 34116 US
BEDOYA MURILLO, JOSE M
188 FURSE LAKES CIR #5
NAPLES, FL 34104 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ANGELA V ARANGO MEJIA 01/16/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 TD
 () Delete
 Title:
 TD
 (X) Change () Addition

 Name:
 STELLA ROJAS, LUZ
 Name:
 ARANGO MEJIA, ANGELA V

 Address:
 4142 18TH PL SW
 Address:
 188 FURSE LAKES CIR #5

 City-St-Zip:
 NAPLES, FL 34104
 City-St-Zip:
 NAPLES, FL 34104

 Address:
 184 FOURCE LAKE CIRCLE #8
 Address:
 3230 29AV NE

 City-St-Zip:
 NAPLES, FL 34104
 City-St-Zip:
 NAPLES, FL 34120

Title: () Delete Title: PD (X) Change () Addition MAURICIO GULARTE, FREDY Name: BEDOYA MURILLO, JOSE M Name: Address: 4515 28TH PL SW Address: 188 FURSE LAKES CIR #5 City-St-Zip: NAPLES, FL 34116 City-St-Zip: NAPLES, FL 34104

 $\label{eq:title:sde} {\sf Title:} \qquad {\sf SD} \qquad (\) \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SD} \qquad ({\sf X}) \ {\sf Change} \ (\) \ {\sf Addition}$

 Name:
 MARINO BEDOYA, JOSE
 Name:
 VAZQUEZ, ILEANA

 Address:
 188 FURSE LAKE CIRCLE #5
 Address:
 3230 29AV NE

 City-St-Zip:
 NAPLES, FL 34104
 City-St-Zip:
 NAPLES, FL 34120

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGELA V ARANGO MEJIA TD 01/16/2005